## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09919605

CLAIMS AS FILED - PART I COMM 2) SMALLENTITY OTHER TO COLUMN 1) (Column 2) TYPE (COLUMN 2) OR SMALL EN													
TOTAL CLAIMS			139	39				RATE	FEE '	المكت	"RATE"	FEE	
FOR .			NUMBER I	NUMBER FILED		NUMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			39 min	39 minus 20=		- 19		X\$ 9=	•	OR	X\$18=	342	
INDEPENDENT CLAIMS			/ ( mi	minus 3 =		8		X40=		OR	X80=	640	•
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=		
* If the difference in column 1 is less than zero, ente						olumn 2		TOTAL		OR	TOTAL	1692	
۸	^ C	LAIMS AS	AMENDED	) - PAR	T-U					,	OTHER	-	,
1-20-06 (Column 1) (Column 2) (Column								SMALL	ENTITY	OR	SMALL	ENTITY	
NT A		CLAIMS REMAINING AFTER AMENDMEN	-			PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	SPP
AMENDMENT	Total	. 39	Minus	3	39	خ (() =		X\$ 9=		OR	X\$18=		•
AME	Independent	• 11	Minus	***		= 'Ø		X40=		OR	X80=		31E
	FIRST PRESE	NTATION OF	MULTIPLE DE	PENDEN	T CLAIM			+135=		OR	+270=		EST MVAILABL
	•						ا	TOTAL	ne dia si	OR	YOTAL		
		(Column 1		e (Coli	imn 2) 😭	(Column 3)		ADDIT FEE	A 100		ADDIT PE		
8		CLAIMS REMAINING	1.4	HIG	HEST		1"	A KANA X	*ADDI-N	14	<b>*</b>		
EN		AFTER AMENDMEN		PREV	OUSLY FOR	EXTRA		RATE	TIONAL FEE		RATE	TIONAL	
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MENDM	Independent	Part of Asset	Minus /		<u>an iki energi</u> Joseph Ting	# 100 m	1	X40=	AND THE PERSON NAMED IN	ᅋ	VOA	4	194
	FIRST PRESE	NTATION OF	MULTIPLE DE	PENDEN	T CLAIM		1	,40=		OR	700-	<b> </b>	-
										OR	+270=		_
								TOTAL ADDIT, FEE		OR	ADDIT. FE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMEN		NUI PREV	HEST MBER KOUSLY D FOR	PRESENT		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
O ME	Total	•	Minus	••		=	1	X\$ 9=	1	1 IOR	·X\$18=		1
	Independent	•	Minus	•••		=	]	X40=		1	Yee	T	1
	FIRST PRESE	ENTATION OF	MULTIPLE DE	PENDEN	IT CLAIM				-	OR	` <b>├</b>		1
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR			_
										ADDIT. FE	E	_	
1	"If the "Highest No The "Highest Nu	umber Previous! mber Previously	y Paid For IN Th Paid For (Total	ns SPACE or Indepen	: is less th ident) is th	an 3, enter "3." e highest numb	oer fo	und in the ap	propriate b	ox in c	olumn 1.		
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